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CONFIRMATION NO. 4337

SERIAL NUMBER 10/695,245	FILING DATE 10/27/2003  RULE	CLASS 324	GROUP ART UNIT 2829	ATTORNEY DOCKET NO. 6427-65559
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/454,102 03/11/2003  
 and is a CIP of 10/107,052 03/28/2002  
 which is a DIV of 09/662,735 09/15/2000 PAT 6,408,500  
 This application 10/695,245  
 is a CIP of 10/432,808 05/23/2003  
 which is a 371 of PCT/US01/28669 09/14/2001  
 This application 10/695,245  
 is a CIP of 10/439,595 05/16/2003  
 which claims benefit of 60/397,167 07/18/2002  
 and claims benefit of 60/454,102 03/11/2003

Verified *gmH*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*N/A gmH*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 08/11/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>John R. Hgt</i> Examiner's Signature Initials	OR	6	45 42	6

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## TITLE

APPARATUS AND METHOD FOR USE IN TESTING A SEMICONDUCTOR WAFER

<p>FILING FEE RECEIVED 921</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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